

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
DOUG LAMALFA COMMITTEE

ADDRESS (number and street) 2150 RIVER PLAZA DR., #150
 Check if different than previously reported. (ACC) SACRAMENTO CA 95833

2. **FEC IDENTIFICATION NUMBER** C C00509422 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
CA 01

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of CA
06 07 2016

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 16 2014 through 11 24 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer David Bauer
Signature of Treasurer David Bauer *[Electronically Filed]* Date M M / D D / Y Y Y Y
08 12 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
DOUG LAMALFA COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	57575.00	706712.20
(b) Total Contribution Refunds (from Line 20(d))	2500.00	12500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	55075.00	694212.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	99010.85	468145.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3469.87
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	99010.85	464675.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	143320.09	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	30774.99	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Summary page Col C lines 19(b), 19(c) & 22

Form/Schedule:
Transaction ID:

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

DOUG LAMALFA COMMITTEE

Report Covering the Period: From: / / To: / /

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="41075.00"/>	<input type="text" value="300299.99"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="2000.00"/>	<input type="text" value="33954.00"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="43075.00"/>	<input type="text" value="334253.99"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="150.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="14500.00"/>	<input type="text" value="372308.21"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 54

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
57575.00	706712.20	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	34510.99	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	3469.87	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
2000.00	2475.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
59575.00	747168.06	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 54

Write or Type Committee Name

DOUG LAMALFA COMMITTEE

Report Covering the Period: From: / / To: / /

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
99010.85	468145.31	3463.45
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
45000.00	120000.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
45000.00	120000.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
2500.00	12500.00	1000.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 7 / 54

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---	---

(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

2500.00	12500.00	1000.00
---------	----------	---------

21. OTHER DISBURSEMENTS

9000.00	126040.00	0.00
---------	-----------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

155510.85	726685.31	4463.45
-----------	-----------	---------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

55075.00	694212.20	-1000.00
----------	-----------	----------

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

99010.85	464675.44	3463.45
----------	-----------	---------

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	239255.94
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	59575.00
25. SUBTOTAL (add Line 23 and Line 24).....	298830.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	155510.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	143320.09

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN MAYFIELD

Mailing Address 307 S. MAIN ST., STE. B

City Ukiah State CA Zip Code 95482

FEC ID number of contributing federal political committee. **C**

Name of Employer MAYFIELD CONSULTING Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : INCA2751

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
CHARLES CRAIN JR.

Mailing Address 10695 DECKER AVE.

City Los Molinos State CA Zip Code 96055

FEC ID number of contributing federal political committee. **C**

Name of Employer Crain Orchards Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2014

Transaction ID : INCA2793

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Harold Crain

Mailing Address 23830 Bray Ave.

City RED BLUFF State CA Zip Code 96080

FEC ID number of contributing federal political committee. **C**

Name of Employer Crain Ranch Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2014

Transaction ID : INCA2787

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Brett Jensen		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address P. O. Box 369		Transaction ID : INCA2786
City ALAMO	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Jensen Properties	Occupation Investor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. Louwene Parsons		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address 41710 Rio Bravo Dr.		Transaction ID : INCA2792
City CHICO	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer First Responder	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. SOLE TERRA FARMING		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address PO BOX 4436		Transaction ID : INCA2790
City Chico	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Unincorporated	Occupation Partnership	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
PAMELA CINQUINI

Mailing Address **PO BOX 4436**

City **Chico** State **CA** Zip Code **95927**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOLE TERRA FARMING** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : IDTA262

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
RICK CINQUINI

Mailing Address **PO BOX 4436**

City **Chico** State **CA** Zip Code **95927**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOLE TERRA FARMING** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : IDTA263

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JEREMY ZWINGER

Mailing Address **447 Paseo Companeros**

City **Chico** State **CA** Zip Code **95928**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FARM & TRADE** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : INCA2788

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Susan Zwinger

Mailing Address 447 Paseo Companeros

City State Zip Code
CHICO CA 95928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Chiropractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 18 2014

Transaction ID : INCA2795

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Gene Whitehouse

Mailing Address 3345 Sierra Springs Ct.

City State Zip Code
Penryn CA 95663

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United Auburn Indian Community Tribal Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 19 2014

Transaction ID : INCA2799

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Dana Burroughs

Mailing Address 12729 Honcut Rd.

City State Zip Code
MARRYSVILLE CA 95901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
n/a Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 20 2014

Transaction ID : INCA2825

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Evelyn Caldwell

Mailing Address 3305 Neal Road

City Paradise State CA Zip Code 95969

FEC ID number of contributing federal political committee. **C**

Name of Employer Northgate Petroleum Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2832

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mary Conkey

Mailing Address 735 Sunrise Ave., #200

City ROSEVILLE State CA Zip Code 95661

FEC ID number of contributing federal political committee. **C**

Name of Employer J R Petroleum, LLC Occupation MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2831

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JENNIE DUBOSE

Mailing Address 8394 DURNEL DR.

City Durham State CA Zip Code 95938

FEC ID number of contributing federal political committee. **C**

Name of Employer RENTAL GUYS Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2836

Amount of Each Receipt this Period
550.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Shirley Helmus

Mailing Address 6771 Woodland Dr.

City Paradise State CA Zip Code 95969

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2846

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
CHRISTINE KEENEY

Mailing Address 2243 DURHAM DAYTON HWY.

City Durham State CA Zip Code 95938

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2774

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Morris Keeney

Mailing Address 2243 Durham Dayton Hwy

City Durham State CA Zip Code 95938

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2773

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
BRYCE LUNDBERG

Mailing Address 1621 NEAL DOW AVE.

City Chico	State CA	Zip Code 95926
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LUNDBERG FAMILY FARMS	Occupation FARMING
---	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
925.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2828

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BRYCE LUNDBERG

Mailing Address 1621 NEAL DOW AVE.

City Chico	State CA	Zip Code 95926
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LUNDBERG FAMILY FARMS	Occupation FARMING
---	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
925.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2826

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Grant Lundberg

Mailing Address 1251 Oroville Chico Hwy

City Durham	State CA	Zip Code 95938
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Wehah Farms, Inc	Occupation CEO
--------------------------------------	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
925.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2829

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROCQUE MERLO

Mailing Address 1380 MANZANITA AVENUE #124, PMB 30

City State Zip Code
CHICO CA 95926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
R.E.MERLO GENERAL FARMING, INC. FARMER/AGRICULTURE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA2750

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Neill Mitchell

Mailing Address 365 Wilson Rd.

City State Zip Code
Yuba City CA 95991

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA2844

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dennis Mosher

Mailing Address 2819 Dawnridge Dr.

City State Zip Code
REDDING CA 96001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
n/a Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA2837

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Barbara Rocchi

Mailing Address 66 Palermo Dr.

City Oroville State CA Zip Code 95966

FEC ID number of contributing federal political committee. **C**

Name of Employer Oroville Vision Occupation Bookkeeper

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2842

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
. Salt River Pima Maricopa India

Mailing Address 10005 E. Osborn Rd.

City SCOTTSDALE State AZ Zip Code 85256

FEC ID number of contributing federal political committee. **C**

Name of Employer Sovereign nation Occupation Indian tribe

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2810

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Timothy Schultz

Mailing Address 45 Ewing Dr.

City CHICO State CA Zip Code 95973

FEC ID number of contributing federal political committee. **C**

Name of Employer Lundberg Farms Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2827

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3150.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dianne Franklin

Mailing Address P.O. Box 1303

City State Zip Code
Bella Vista CA 96008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Franklin Logging, Inc. President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : INCA2851

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
John Hasbrook

Mailing Address 5111 Putah Creek Road

City State Zip Code
Winters CA 95694

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sunwest Foods Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : INCA2849

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Edgar Meyer

Mailing Address 35 Fairway Dr.

City State Zip Code
CHICO CA 95928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Meyer Farms Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : INCA2847

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Melbay Farms

Mailing Address 2661 Encinal Road

City State Zip Code
Live Oak CA 95953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unincorporated Partnership

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA2860

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Melinda Nevis

Mailing Address 2661 Encinal Road

City State Zip Code
Live Oak CA 95953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : IDTA264

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
. Shakoep Mdewakanton Sioux Com

Mailing Address 2330 Sioux Trail, NW

City State Zip Code
PRIOR LAKE MN 55372

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sovereign nation Indian Tribe

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA2859

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Bonnie Bayles

Mailing Address 1111 California Street

City State Zip Code
Gridley CA 95948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self - Bonnie Bayles Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA2867

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Richard Marshall

Mailing Address 11720 Eastside Road

City State Zip Code
Fort Jones CA 96032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA2864

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
RICHARD GOLB

Mailing Address 20215 SE FERNRIDGE DR.

City State Zip Code
Camas WA 98607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PACIFIC COMM LLC CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA2872

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

975.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Nancy Griswold		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 2546 W. Sacramento Avenue		Transaction ID : INCA2874
City Chico	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation Farmer	Election Cycle-to-Date 400.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Cleve Baker		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 600 Del Oro Street		Transaction ID : INCA2908
City Woodland	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer n/a	Occupation retired	Election Cycle-to-Date 230.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. William Lockett		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 21448 Cranmore Road		Transaction ID : INCA2902
City Knights Landing	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation Farmer	Election Cycle-to-Date 300.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 54
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Matthew R. Anchordoguy		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2014
Mailing Address 4030 Rowles Road		Transaction ID : INCA2927
City Vina	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Matt Anchordoguy Co.	Occupation General Engineer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Daniel Vecchiarelli		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2014
Mailing Address 1830 W. 38th Ave.		Transaction ID : INCA2901
City DENVER	State CO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Leprino Foods	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	41075.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOC. PAC

Mailing Address 25 MASSACHUSETTS AVE. NW #600

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : INCA2796

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Farmers' Rice Cooperative

Mailing Address 2525 Natomas Park Drive, #300

City State Zip Code
Sacramento CA 95833

FEC ID number of contributing federal political committee. **C C00146605**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4142.86

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : INCA2785

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
FARM CREDIT PAC

Mailing Address 50 F ST. NW, STE. 900

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C C00193631**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
11000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA2779

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees' PAC

Mailing Address 2121 Crystal Dr., #100

City ARLINGTON State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2812

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
TRUCK PAC

Mailing Address 430 FIRST ST., SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA2811

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
FARM PAC

Mailing Address 2300 RIVER PLAZA DR.

City Sacramento State CA Zip Code 95833

FEC ID number of contributing federal political committee. **C** C00041954

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA2869

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Nat'l Pro-Life Alliance PAC

Mailing Address 4521 Windsor Arms Ct.

City ANNANDALE State VA Zip Code 22003

FEC ID number of contributing federal political committee. **C C00358051**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA2878

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Western United Dairymen PAC

Mailing Address 1315 K Street

City Modesto State CA Zip Code 95354

FEC ID number of contributing federal political committee. **C C00186072**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2014

Transaction ID : INCA2894

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Occidental Petroleum Corp. PAC

Mailing Address 10889 Wilshire Blvd.

City LOS ANGELES State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA2897

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Occidental Petroleum Corp. PAC

Mailing Address 10889 Wilshire Blvd.

City State Zip Code
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee. **C** C00083857

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA2896

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

14500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 54
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Strickland for Congress

Mailing Address P.O. Box 1371

City THOUSAND OAKS State CA Zip Code 91358

FEC ID number of contributing federal political committee. **C** C00543165

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA2857

Amount of Each Receipt this Period
2000.00

Check lost in mail

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

2000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Chico Republican Women Federated			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 1 Stratford Way			Amount of Each Disbursement this Period 50.00	
City Chico	State CA	Zip Code 95973	Transaction ID : EXPB2771	
Purpose of Disbursement Meeting		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Gilliard, Blanning & Assoc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 1610.00	
City Rocklin	State CA	Zip Code 95765	Transaction ID : EXPB2800	
Purpose of Disbursement Radio production		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Jason McCormick			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 27 Baltar Loop #2			Amount of Each Disbursement this Period 20.09	
City Chico	State CA	Zip Code 95973	Transaction ID : EXPB2764	
Purpose of Disbursement Supplies		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1680.09
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Jason McCormick			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 27 Baltar Loop #2			Amount of Each Disbursement this Period 60.47	
City Chico	State CA	Zip Code 95973	Transaction ID : EXPB2766	
Purpose of Disbursement Food for volunteers		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Jason McCormick			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 27 Baltar Loop #2			Amount of Each Disbursement this Period 27.04	
City Chico	State CA	Zip Code 95973	Transaction ID : EXPB2762	
Purpose of Disbursement Food for volunteers		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Jason McCormick			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 27 Baltar Loop #2			Amount of Each Disbursement this Period 171.79	
City Chico	State CA	Zip Code 95973	Transaction ID : EXPB2760	
Purpose of Disbursement Food for volunteers		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	259.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 2100 Dr. Martin Luther King		Amount of Each Disbursement this Period 123.45
City Chico	State CA	
Zip Code 95928	Purpose of Disbursement Food for volunteers	Transaction ID : PDTB53EXPB2760
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Jason McCormick		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 27 Baltar Loop #2		Amount of Each Disbursement this Period 19.98
City Chico	State CA	
Zip Code 95973	Purpose of Disbursement Food for volunteers	Transaction ID : EXPB2768
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jason McCormick		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 27 Baltar Loop #2		Amount of Each Disbursement this Period 22.55
City Chico	State CA	
Zip Code 95973	Purpose of Disbursement Food for volunteers	Transaction ID : EXPB2758
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	42.53
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Jason McCormick			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 27 Baltar Loop #2			Amount of Each Disbursement this Period 2817.26	
City Chico	State CA	Zip Code 95973	Transaction ID : EXPB2770	
Purpose of Disbursement Campaign consulting, mileage		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Chico Locker & Sausage Co.			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 196 E 14th St.			Amount of Each Disbursement this Period 1213.16	
City Chico	State CA	Zip Code 95928	Transaction ID : EXPB2903	
Purpose of Disbursement Fundraising food		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CORDI WINERY			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 10401 INGRAM LN.			Amount of Each Disbursement this Period 1135.20	
City LIVE OAK	State CA	Zip Code 95953	Transaction ID : EXPB2775	
Purpose of Disbursement Wine for fundraiser		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5165.62
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 2100 Dr. Martin Luther King		Amount of Each Disbursement this Period 1303.71
City Chico	State CA	
Zip Code 95928	Purpose of Disbursement Fundraising food	Transaction ID : EXPB2904
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 49.75
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	Transaction ID : EXPB2778
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Monaco Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address 1011 S. Linwood Ave.		Amount of Each Disbursement this Period 12669.99
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Mass mail	Transaction ID : EXPB2794
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14023.45
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 54		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address P. O. Box 537104		Amount of Each Disbursement this Period 121.98 Transaction ID : EXPB2840
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement Phone svc.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Public Square Partners		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1127 11th St., #548		Amount of Each Disbursement this Period 1235.13 Transaction ID : EXPB2839
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Fundraising expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Steinberg and Assoc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 335 Stunt Rd.		Amount of Each Disbursement this Period 14750.00 Transaction ID : EXPB2807
City Calabasas	State CA	
Zip Code 91302	Purpose of Disbursement Polling	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16107.11
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. The Monaco Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 1011 S. Linwood Ave.			Amount of Each Disbursement this Period 10241.11	
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB2804	
Purpose of Disbursement Mass mail		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 1225 8TH ST. #425			Amount of Each Disbursement this Period 635.62	
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB2848	
Purpose of Disbursement Merchant fee		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Dave's Party Rentals			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 2531 South 5th Avenue			Amount of Each Disbursement this Period 2069.38	
City Oroville	State CA	Zip Code 95965	Transaction ID : EXPB2854	
Purpose of Disbursement Fundraising expenses		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	12946.11
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Political Data Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address P. O. Box 59570		Amount of Each Disbursement this Period 872.61 Transaction ID : EXPB2853
City Norwalk	State CA	
Zip Code 90652	Purpose of Disbursement Mailing list	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 200.75 Transaction ID : EXPB2862
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Monaco Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2014
Mailing Address 1011 S. Linwood Ave.		Amount of Each Disbursement this Period 2368.92 Transaction ID : EXPB2861
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Postage	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3442.28
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 54		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 259.84
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement Credit card payment	Transaction ID : EXPB2866
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Metro PCS		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 961 Dana Dr., #110		Amount of Each Disbursement this Period 153.84
City REDDING	State CA	
Zip Code 96003	Purpose of Disbursement Phone svc.	Transaction ID : EDTB77EXPB2866
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. The Monaco Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 1011 S. Linwood Ave.		Amount of Each Disbursement this Period 6472.12
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Postage	Transaction ID : EXPB2865
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6731.96
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 54			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial)

A. EFUNDRAISING CONNECTIONS

Mailing Address 1225 8TH ST. #425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 10 / 28 / 2014

Amount of Each Disbursement this Period 7.00

Transaction ID : EXPB2876

Category/Type 001

Full Name (Last, First, Middle Initial)

B. Chase Card Services

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement Credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 10 / 30 / 2014

Amount of Each Disbursement this Period 424.54

Transaction ID : EXPB2877

Category/Type 001

Full Name (Last, First, Middle Initial)

C. Metro PCS

Mailing Address 167 G St. #101

City LINCOLN State CA Zip Code 95648

Purpose of Disbursement Phone svc.

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 10 / 30 / 2014

Amount of Each Disbursement this Period 40.00

Transaction ID : EDTB78EXPB2877

[MEMO ITEM]

Category/Type 001

SUBTOTAL of Disbursements This Page (optional)..... 431.54

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 300 1st St. SE			Amount of Each Disbursement this Period 118.80
City WASHINGTON	State DC	Zip Code 20006	
Purpose of Disbursement Meeting		Category/ Type 001	Transaction ID : EDTB79EXPB2877 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Capital Strategies D.C.			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address P.O. Box 1605			Amount of Each Disbursement this Period 13057.00
City ALEXANDRIA	State VA	Zip Code 22313	
Purpose of Disbursement Fundraising commission		Category/ Type 003	Transaction ID : EXPB2880
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Chase Card Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address P.O. Box 94014			Amount of Each Disbursement this Period 376.68
City Palatine	State IL	Zip Code 60094	
Purpose of Disbursement Credit card payment		Category/ Type 001	Transaction ID : EXPB2881
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	13433.68
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2105 Churn Creek Rd.		Amount of Each Disbursement this Period 74.18
City REDDING	State CA	
Zip Code 96002	Purpose of Disbursement Copies	Transaction ID : EDTB80EXPB2881
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Chico State College Republicans		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1271 Wanderer Ln.		Amount of Each Disbursement this Period 500.00
City CHICO	State CA	
Zip Code 95973	Purpose of Disbursement Donation	Transaction ID : EXPB2882
Candidate Name	012 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Monaco Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1011 S. Linwood Ave.		Amount of Each Disbursement this Period 9686.55
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Mass mail	Transaction ID : EXPB2883
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10186.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 54		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Nicolas Appell		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 545 W. 8th St.		Amount of Each Disbursement this Period 350.00 Transaction ID : EXPB2893
City Chico	State CA	
Zip Code 95928	Purpose of Disbursement Phonebanks	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Amanda Bettencourt		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 928 Karen Dr.		Amount of Each Disbursement this Period 500.00 Transaction ID : EXPB2885
City CHICO	State CA	
Zip Code 95928	Purpose of Disbursement Phonebanks	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. John Breuker		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 12 Sunland Dr.		Amount of Each Disbursement this Period 400.00 Transaction ID : EXPB2886
City CHICO	State CA	
Zip Code 95926	Purpose of Disbursement Phonebanks	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Taylor Criddle		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 402 Covillaud Pl.		Amount of Each Disbursement this Period 300.00 Transaction ID : EXPB2887
City Marysville	State CA	
Zip Code 95901	Purpose of Disbursement Phonebanks	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 16.75 Transaction ID : EXPB2938
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Haley Meace		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 815 Pomona Ave. #15D		Amount of Each Disbursement this Period 400.00 Transaction ID : EXPB2888
City Chico	State CA	
Zip Code 95928	Purpose of Disbursement Phonebanks	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	716.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 54			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Public Square Partners			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 1127 11th St., #548			Amount of Each Disbursement this Period 3044.84 Transaction ID : EXPB2898
City Sacramento	State CA	Zip Code 95814	
Purpose of Disbursement Fundraising consulting and expenses		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Adam Steele			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 5905-D Clark Rd.			Amount of Each Disbursement this Period 300.00 Transaction ID : EXPB2891
City Paradise	State CA	Zip Code 95960	
Purpose of Disbursement Phonebanks		Category/ Type 004	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. John Zapata-McMillen			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 848 W. 1st St. Unit 1			Amount of Each Disbursement this Period 500.00 Transaction ID : EXPB2892
City CHICO	State CA	Zip Code 95928	
Purpose of Disbursement Phonebanks		Category/ Type 004	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3844.84
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 54		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Butte County Clerk		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 25 County Center Drive		Amount of Each Disbursement this Period 1156.26 Transaction ID : EXPB2940
City Oroville	State CA Zip Code 95965	
Purpose of Disbursement Ballot statement	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jason McCormick		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 27 Baltar Loop #2		Amount of Each Disbursement this Period 41.17 Transaction ID : EXPB2914
City Chico	State CA Zip Code 95973	
Purpose of Disbursement Snacks for volunteers	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jason McCormick		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 27 Baltar Loop #2		Amount of Each Disbursement this Period 374.10 Transaction ID : EXPB2916
City Chico	State CA Zip Code 95973	
Purpose of Disbursement Supplies	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1571.53
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2100 Dr. Martin Luther King		Amount of Each Disbursement this Period 324.86
City Chico	State CA	
Zip Code 95928	Purpose of Disbursement Supplies	Transaction ID : PDTB54EXPB2916
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Jason McCormick		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 27 Baltar Loop #2		Amount of Each Disbursement this Period 121.34
City Chico	State CA	
Zip Code 95973	Purpose of Disbursement Supplies	Transaction ID : EXPB2918
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jason McCormick		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 27 Baltar Loop #2		Amount of Each Disbursement this Period 41.31
City Chico	State CA	
Zip Code 95973	Purpose of Disbursement Supplies	Transaction ID : EXPB2920
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	162.65
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 54	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Jason McCormick		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 27 Baltar Loop #2		Amount of Each Disbursement this Period 2867.00 Transaction ID : EXPB2922
City Chico	State CA	
Zip Code 95973	Purpose of Disbursement Campaign consulting and mileage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 184.95 Transaction ID : EXPB2925
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone svc.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Public Square Partners		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 1127 11th St., #548		Amount of Each Disbursement this Period 3463.45 Transaction ID : EXPB2907
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Fundraising expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6515.40
TOTAL This Period (last page this line number only).....	98511.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 54	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Doug LaMalfa		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 16 LaMalfa Lane		Amount of Each Disbursement this Period 45000.00
City Oroville	State CA Zip Code 95965	
Purpose of Disbursement	Candidate Name	Transaction ID : PAYB2900
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	45000.00
TOTAL This Period (last page this line number only).....	45000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 54	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. . Match-E-Be-Nash-She-Wish Band			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address P. O. Box 218			Amount of Each Disbursement this Period 1500.00	
City DORR	State MI	Zip Code 49323	Transaction ID : EXPB2906	
Purpose of Disbursement Prior contribution reported in error		010 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Joann Diethrich			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014	
Mailing Address P.O. Box 1200			Amount of Each Disbursement this Period 1000.00	
City GRIDLEY	State CA	Zip Code 95948	Transaction ID : EXPB2926	
Purpose of Disbursement Refund		010 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		<input type="checkbox"/> Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 54	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Andy Tobin for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1002 E. Griswold Rd.		Amount of Each Disbursement this Period 1000.00 Transaction ID : EXPB2809
City PHOENIX	State AZ	
Zip Code 85020	Purpose of Disbursement 011 Category/Type	
Candidate Name Andy Tobin	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AZ District: 01	

Full Name (Last, First, Middle Initial) B. Bruce Poliquin for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address P.O. Box 50		Amount of Each Disbursement this Period 1500.00 Transaction ID : EXPB2805
City OAKLAND	State ME	
Zip Code 04963	Purpose of Disbursement 011 Category/Type	
Candidate Name Bruce Poliquin	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: ME District: 02	

Full Name (Last, First, Middle Initial) c. Carlos Curbelo Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 8770 Sunset Dr. #355		Amount of Each Disbursement this Period 1000.00 Transaction ID : EXPB2801
City MIAMI	State FL	
Zip Code 33173	Purpose of Disbursement 011 Category/Type	
Candidate Name Carlos Curbelo	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 54			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Lynn Jenkins for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address P.O. Box 1441		Amount of Each Disbursement this Period 1500.00 Transaction ID : EXPB2802
City TOPEKA	State KS	
Zip Code 66601	Purpose of Disbursement 011	
Candidate Name Lynn Jenkins		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KS	District: 02	

Full Name (Last, First, Middle Initial) B. McSally for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address P.O. Box 19128		Amount of Each Disbursement this Period 1000.00 Transaction ID : EXPB2803
City TUCSON	State AZ	
Zip Code 87531	Purpose of Disbursement 011	
Candidate Name Martha McSally		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ	District: 01	

Full Name (Last, First, Middle Initial) c. Zeldin for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address P.O. Box 610		Amount of Each Disbursement this Period 1000.00 Transaction ID : EXPB2852
City SHIRLEY	State NY	
Zip Code 11967	Purpose of Disbursement 011	
Candidate Name Lee Zeldin		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 54
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Strickland for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address P.O. Box 1371		Amount of Each Disbursement this Period 2000.00 Transaction ID : EXPB2858
City THOUSAND OAKS State CA Zip Code 91358	Purpose of Disbursement 011 Category/Type	
Candidate Name Tony Strickland	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 26		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	9000.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DOUG LAMALFA COMMITTEE** Transaction ID : **PAYC315**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Doug LaMalfa

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 16 LaMalfa Lane

City State ZIP Code
 Oroville CA 95965

Original Amount of Loan 125000.00	Cumulative Payment To Date 95000.00	Balance Outstanding at Close of This Period 30000.00
--------------------------------------	--	---

TERMS

Date Incurred: M 03 / D 30 / Y 2012
 Date Due: M M / D D / Y 12/31/2012
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	30000.00
TOTALS This Period (last page in this line only).....	▶	30000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC315

Personal funds

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jason McCormick		Nature of Debt (Purpose): Food for volunteers
Mailing Address 27 Baltar Loop #2		
City	State	Zip Code
Chico	CA	95973

Outstanding Balance Beginning This Period	Transaction ID : PAYD2752	
<input type="text" value="22.55"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="22.55"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jason McCormick		Nature of Debt (Purpose): Food for volunteers
Mailing Address 27 Baltar Loop #2		
City	State	Zip Code
Chico	CA	95973

Outstanding Balance Beginning This Period	Transaction ID : PAYD2753	
<input type="text" value="171.79"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="171.79"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jason McCormick		Nature of Debt (Purpose): Food for volunteers
Mailing Address 27 Baltar Loop #2		
City	State	Zip Code
Chico	CA	95973

Outstanding Balance Beginning This Period	Transaction ID : PAYD2754	
<input type="text" value="27.04"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="27.04"/>	<input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jason McCormick		Nature of Debt (Purpose): Supplies
Mailing Address 27 Baltar Loop #2		
City	State	Zip Code
Chico	CA	95973

Outstanding Balance Beginning This Period	Transaction ID : PAYD2755	
<input type="text" value="20.09"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="20.09"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jason McCormick		Nature of Debt (Purpose): Food for volunteers
Mailing Address 27 Baltar Loop #2		
City	State	Zip Code
Chico	CA	95973

Outstanding Balance Beginning This Period	Transaction ID : PAYD2756	
<input type="text" value="60.47"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="60.47"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jason McCormick		Nature of Debt (Purpose): Food for volunteers
Mailing Address 27 Baltar Loop #2		
City	State	Zip Code
Chico	CA	95973

Outstanding Balance Beginning This Period	Transaction ID : PAYD2757	
<input type="text" value="19.98"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="19.98"/>	<input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Data Inc.		Nature of Debt (Purpose): Mailing lists
Mailing Address P. O. Box 59570		
City	State	Zip Code
Norwalk	CA	90652

Outstanding Balance Beginning This Period	Transaction ID : PAYD2929	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="774.99"/>	<input type="text" value="0.00"/>	<input type="text" value="774.99"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Steinberg and Assoc.		Nature of Debt (Purpose): Polling
Mailing Address 335 Stunt Rd.		
City	State	Zip Code
Calabasas	CA	91302

Outstanding Balance Beginning This Period	Transaction ID : PAYD2806	
<input type="text" value="14750.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="14750.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="774.99"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="774.99"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="30000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="30774.99"/>